JUL 3 0 2007

162436



Postfach 4741 78512 Tuttlingen Telefon (07461) 93320 Telefax (07461) 93328 mail@mondeal.de

## 510(k) SUMMARY OF SAFETY AND EFFECTIVENESS

Date:

July 24, 2006

Submitter:

Name:

Mondeal Medical Systems GmbH

Address:

Moltkestr. 39

78532 Tuttlingen

Germany

Contact

Ralph Duerr

Person:

Telephone:

+49.7461.933214

Fax:

+49.7461.93328

**Product:** 

Trade Name:

SIS Sinus Implant Stabilizer

Classification:

Class II

Common Name:

Bone Plate

Classification Name: Endosseous Implant

Predicate Devices:

Synocta Prosthetics, K990342

Mini Bone Plate System, K951392

Micro Titanium Plate System, K951688

Lin/Liou Orthodontic Mini Anchor System (LOMAS),

K042345 & K050257

Device Description: The SIS Sinus Implant Stabilizer consists of a titanium plate provided with 3 large perforations for screw fixation of

implants for premolars and first molars. It may be additionally secured in place with titanium microscrews and is provided in

two sizes for use with different implant systems.

Intended Use:

The SIS Sinus Implant Stabilizer is intended to provide a fixed anchorage point to stabilize dental implants in the sinus region, enabling sinus augmentation and implantation to be

carried out in one session.

Performance Data:

Testing was performed to support substantial equivalence to the predicate devices. The SIS Sinus Implant Stabilizer met

all specified design and performance requirements.

KI 1



Postfach 4741 78512 Tuttlingen Telefon (07461) 9 33 20 Telefax (07461) 9 33 28 mail@mondeal.de

Sterilization

The SIS Sinus Implant Stabilizer is intended for single use and may be offered either sterile by gamma radiation or nonsterile for autoclave steam sterilization.

Conclusion:

Based upon the product technical information provided, intended use and performance information provided in this premarket notification, as well as similarity to legally marketed devices, Mondeal Medical Systems GmbH considers the SIS Sinus Implant Stabilizer to be substantially equivalent to the current legally marketed predicate devices.





Food and Drug Administration 9200 Corporate Boulevard Rockville MD 20850

Mondeal Medical Systems GmbH C/O Ms. Angelika Scherp Regulatory Affairs Consultant **Business Support International** Amstel 320-I 1017 AP Amsterdam THE NETHERLANDS

JUL 3 0 2007

Re: K062436

Trade/Device Name: SIS Sinus Implant Stabilizer

Regulation Number: 21 CFR 872.4760

Regulation Name: Endosseous Dental Implant Accessories

Regulatory Class: II Product Code: JEY Dated: July 4, 2007

Received: July 13, 2007

## Dear Ms. Scherp:

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act) that do not require approval of a premarket approval application (PMA). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration.

If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to such additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 898. In addition, FDA may publish further announcements concerning your device in the Federal Register.

Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must comply with all the Act's requirements, including, but not limited to: registration and listing (21 CFR Part 807); labeling (21 CFR Part 801); good manufacturing practice requirements as set forth in the quality systems (QS) regulation (21 CFR Part 820); and if applicable, the electronic product radiation control provisions (Sections 531-542 of the Act); 21 CFR 1000-1050.

This letter will allow you to begin marketing your device as described in your Section 510(k) premarket notification. The FDA finding of substantial equivalence of your device to a legally marketed predicate device results in a classification for your device and thus, permits your device to proceed to the market.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801), please contact the Office of Compliance at (240) 276-0115. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21 CFR Part 807.97). You may obtain other general information on your responsibilities under the Act from the Division of Small Manufacturers, International and Consumer Assistance at its toll-free number (800) 638-2041 or (301) 443-6597 or at its Internet address http://www.fda.gov/cdrh/industry/support/index.html.

Sincerely yours,

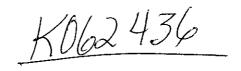
Chiu Lin, Ph.D.

Director

Division of Anesthesiology, General Hospital, Infection Control and Dental Devices Office of Device Evaluation Center for Devices and

pute y. Michand mo

Radiological Health



## INDICATIONS FOR USE

510(k) Number (if known):

Device Name: SIS Sinus Implant Stabilizer

Indications for Use: The SIS Sinus Implant Stabilizer is intended to provide a fixed anchorage point to stabilize dental implants in the sinus region, enabling sinus augmentation and implantation to be carried out in one session.

Prescription Use X	AND/OR	Over-The-Counter Use	
(Part 21 CFR 801 Subpart D)	•	(21 CFR 807 Subpart C)	
(PLEASE DO NOT WRITE BELOV	W THIS LINE - CONT	INUE ON ANOTHER PAGE IF NEEDED)	
Concurrence o	f CDRH, Office of De	vice Evaluation (ODE)	
(Division Sign-Off)			
Division of Anesthesio	logy, General Hosp	pital	
Infection Control, Dent			
510(k) Number:	K062436		
	•	Page 1 of1_	